

**CYPRUS ORGANISATION FOR THE HALLMARKING
OF ARTICLES OF PRECIOUS METALS**

THE CYPRUS ASSAY OFFICE

Larnaca Industrial Area
P. O. Box 45047, Post Code 7110, Aradippou, Tel.: 24532626, Fax: 24533773

APPLICATION FOR REGISTRATION IN THE MANUFACTURERS REGISTER

For Official Use

Registration No. K.....

FULL NAME (CAPITAL LETTERS).....

NAME (Director / Partner / Owner).....

WORK ADDRESS:

Postal Code: Town: P.O.Box: Postal Code:

Tel. No.: Mobile No.:

Fax No.: E-MAIL:

Website:

I declare that the above information is true.

Name: Title:

Signature: Date:

REGISTRATION FEE: €200

FOR OFFICIAL USE

Invoice No.:

Signature:

Signature of Assay Master

Date:

**CYPRUS ORGANISATION FOR THE HALLMARKING
OF ARTICLES OF PRECIOUS METALS**





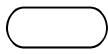




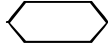




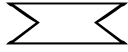

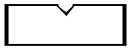






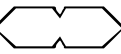


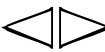



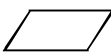
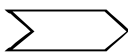


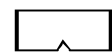






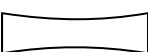



APPLICATION FOR REGISTRATION OF MANUFACTURERS MARK

For Official Use
Registration No. K.....

FULL NAME:

Mark Initials:	Design No.:
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Suggested Designs

- | | | | | |
|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| 1.  | 2.  | 3*.  | 4*.  | 5.  |
| 6.  | 7*.  | 8*.  | 9*.  | 10.  |
| 11*.  | 12*.  | 13*.  | 14*.  | 15.  |
| 16*.  | 17.  | 18*.  | 19*.  | 20.  |
| 21.  | 22.  | 23*.  | 24.  | 25*.  |
| 26.  | 27*.  | 28.  | 29*.  | 30*.  |
| 31.  | 32.  | 33.  | 34*.  | 35.  |
| 36*.  | 37*.  | 38*.  | 39*.  | 40.  |
| 41*.  | 42*.  | 43*.  | 44*.  | 45*.  |

* The size must be bigger than 1 mm.

Applicant's signature:.....

The punch must be submitted within 3 months for verification.

FOR OFFICIAL USE

APPROVED NOT APPROVED

Signature:

Date.: